Doc Code: OATH

PTO/SB/01 (05-08)

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DECLARATION FOR UTILITY OF	₹
DESIGN	
PATENT APPLICATION	
(37 CFR 1.63)	

Declaration Submitted With Initial Filing

OR

Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (f)) required)

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Number	5 1	W-355-6-7-02	rol number.
First Named In	ventor	Russell Keene	
	COMF	PLETE IF KNOWN	
Application Nur	mber	10/597,525	
Filing Date		July 28, 2006	
Art Unit			
Examiner Name	•		

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I hereby declare the and (2) I believe the for which a patent is	at: (1) Each inv inventor(s) name sought on the in	ventor's residence, mailing a ned below to be the original	address, and citizensh and first inventor(s) of	ip are as stated below next to their nam f the subject matter which is claimed an	ne
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the application of whi	ich	(Title of the	Invention)		
is attached h					
OR	ereto				
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was filed on (N	/M/DD/YYYY)	02/18/2005]		
	·		as United States A	Application Number or PCT Internations	al
Application Number	PCT/US05/0057	714 and was amended	d on (MM/DD/YYYY)	(if applicable).
I hereby state that I ha	ave reviewed an	ad undomtor data.			,
amended by any ame	ndment specific	cally referred to above.	of the above identified	application, including the claims, as	
continuation-in-part ap	oplications, mate	erial information which because	al to patentability as	defined in 37 CFR 1.56, including fo on the filing date of the prior application	or
and the national or PC	T international f	erial information which beca filing date of the continuation	n-in-part application	n the filing date of the prior application	n
Authorization To P	ermit Access	To Application by Part			
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[Page 1 of 8]

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DECLARATION _	· Utility or	Design	Patent	Application
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Claim of Foreign Priority	Benefits			
application for patent, invento before that of the application of				oreign application(s) for paten which designated at least on y checking the box, any foreig application having a filing date
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?
				YES NO

[Page 2 of 3]

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

Under the Paperwo	rk Reduc	ction Act of 1995, no persons	s are required to resp	U.S. Patent and Tr. cond to a collection of infor Design Patent Ap	Approved for ademark Commation unle	or use thro	PTO/SB/0? pugh 06/30/2010. OMB 06 DEPARTMENT OF COM tains a valid OMB control r	1 (05-08) 51-0032 MERCE number.
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[Page 3 of 3]

supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.

PTO/SB/02A (07-07)

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DECEARATION		Supplemental	Sneet	Page U of)
Name of Additional Joint Inventor, if a	ny:	A petition	n has been filed for this t	unsigned inventor
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David R.		Friswell		
Inventor's Signature Davil N. Twi	swell			Date 7 28 08
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Mailing Address				
Upton	МА		01568	us
City	State		Zip	Country
Name of Additional Joint Inventor, if ar	ny:	A petition	has been filed for this u	nsigned inventor
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Mark		Moeller		
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City	State		Zip	Country
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Given Name (first and middle (if any))		Family Name or Su	ırname
Charles	1	Murphy		
Inventor's Signature				Date 6/17/2008
Uxbridge Residence: City	MA State		US Country	US Citizenship
24 Holbrook Lane				Curcusub
Mailing Address				
Uxbridge	ма		01569	US
City	State		7in	Country

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Under the Panenwork Reduction Act of 1995, as account	ana ara rasuirad ta ra	U.S. Pa	atent a	nd Trademark Office: U.S.	DEPAR	PTO/SB/02A (07-07) 30/2010. OMB 0651-0032 TIMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no person	ons are required to re-		NAL	INVENTOR(S)	Pac	5 5
Name of Additional Joint Inventor, if an	y:	A pe	tition h	as been filed for this u	nsigned	inventor
Given Name (first and middle (if any))	Family Nan	ne or S	Surname		
Theodore D.		Ciolkosz				
Inventor's Signature Theolow D.	Cilkon	ر			Date	18 June 2008
Milton Residence: City	MA State		us Cour	ntry	US Citize	enship
362 Adams Street						
Mailing Address					·	
Milton City	MA State			02186 Zip	US Coun	try
Name of Additional Joint Inventor, if an	y:	A pet	ition h	as been filed for this ur	nsigned	inventor
Given Name (first and middle (if any)))			Family Name or S	urname	
				***************************************	***************************************	
Inventor's Signature					Date	
Residence: City	State			Country		Citizenship
Mailing Address						
City	State			Zip	Count	try
Name of Additional Joint Inventor, if an	y:	A pet	ition h	as been filed for this ur	nsigned	inventor
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